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P/5488-13

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:

Confirmation No.: 8850

Kai DESINGER et al.

Date: December 14, 2009

Serial No.: 10/564,322

Group Art Unit: 3739

Filed: June 26, 2006

Examiner: Amanda L. Scott

For: SURGICAL PROBE

## **VIA EFS-WEB**

Mail Stop AF

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

AMENDMENT/SUBMISSION

Sir:

This is a response to the final Office Action mailed September 14, 2009 in the above-identified application. Reconsideration of the application is respectfully requested.

## **FEE CALCULATION**

Any additional fee required has been calculated as follows:

\_\_\_\_ If checked, "Small Entity" status is claimed.

	No. Claims		Highest No.					!	
	After		Previously		Extra			ADI	DIT.
	Amendment		Paid For		Present		Rate	F	EE
TOTAL	11	MINUS	20	*=		X	(\$26 SE or \$52)	\$	0
INDEP	1	MINUS	3	**=		X	(\$110 SE or \$220)	\$	0
First Presentation of Multiple Dependent Claim						X	(\$195 SE or \$390)	\$	0
* not less than 20  ** not less than 3							TOTAL	\$	0

If any additional payment is required, a check which includes the calculated fee of \( \) (Our Check No. \_\_\_\_\_) is attached.

In the event the actual fee is greater than the payment submitted or is inadvertently not enclosed or if any additional fee during the prosecution of this application is not paid, the Patent Office is authorized to charge the underpayment to Deposit Account No. 15-0700.

WO